

HAMOT MEDICAL CENTER
Provider Based Physician Time Documentation
Fiscal 2003

COPY

**PLEASE REPORT ONLY THOSE DUTIES THAT ARE SPECIFIED IN
YOUR CONTRACT WITH HAMOT.**

Physician Name: Tullio Emanuele, MD

Department: Clinical Cardiology

Time Study for Two Week Period From 1/4/04 to 1/15/04

SERVICE CATEGORIES:**EXAMPLES****HOURS**

Provider Services: (Services for which you will not bill the patient)

1. Teaching	*Supervision of resident work *Teaching Rounds w/ residents (If you bill the patient for your service, enter the hours under Professional Services, not here) *Lectures/Lecture preparation	<u>1</u> 1
2. Administration	Support services for a hospital department (i.e. scheduling, administrative paperwork)	<u>1</u> 1
3. Medical Supervision of Clinical Personnel	*Supervision of clinical staff *Inservicing clinical staff	<u>1</u> 1
4. Other	*Attending conferences *Quality review activities *Other services not directly related to the medical care of the patient	<u>2</u> 2
5. On Call - Must be physically present @ the hospital		<u>6</u> 5

Professional Services: (Services for which you will bill the patient)

Direct Patient Care or Test Interpretations	Includes supervision of residents and teaching rounds if you bill the patient for your services.	<u>6</u> 6
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TOTAL HOURS

16

PHYSICIAN SIGNATURE: _____

T. Emanuele